Approved for use through 03/31/2012. OMB 0651-0016

U.S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

"FEE	ADDR	FSS"	INDICA	TION	FORM
------	------	------	--------	------	------

Adding		*** (*********************************				
Address to: Mail Stop M Corresponde	nco	Fax to: 571-273-6500				
Commissioner for Patents						
P.O. Box 1450						
Alexandria, VA 22313-145	0					
<b>I</b>						
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application.  When to check the first box below: If you have a Customer Number to represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address,						
in which case a complete	d Request for Customer	Number (PTO/SB/125) must be attached to this form. For				
more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.						
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:						
Customer Number:	22971					
L						
OR						
framework.						
The attached Reques	t for Customer Number (	PTO/SB/125) form.				
PATENT	NUMBER	APPLICATION NUMBER				
i e	nown)	AFFLIOATION NOINDLIX				
7,17	8,101	10/602,572				
Completed by (check one):						
- Completed by (officer office).						
Applicant/Inventor		conil Laters				
		Signature				
✓ Attorney or Agent of rec	ord 34618	Daniel L. Hayes				
- Attorney or Agont or 100.	(Reg. No.)	Typed or printed name				
Assignee of record of the Statement under 37 CFF (Form PTO/SB/96)	e entire interest. See 37 (R 3.73(b) is enclosed.	CFR 3.71. 509-944-4712 Requester's telephone number				
Assignee recorded at Re	⊃el Frame	9/17/2010				
	, ranio	Date				
MOTE: Signatures of all the inventors or	continues of record of the entire in	nterest or their representative(s) are required. Submit multiple forms if more that one				
signature is required, see below*.	assignees of record of the entire in	iterest or their representative(s) are required. Submit multiple forms it more that one				

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 m inutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alex andria, VA 22313- 1450. DO NOT SEND COMPLETE D FORMS TO THIS A DDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

\_forms are submitted.

\* Total of

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.